Thank you to Co-chairs Daugherty Abrams and Steinberg, Vice Chairs Anwar, Gilchrist, and Kushner, and ranking and committee members for holding this Public Health Committee Public Hearing, and for allowing my written testimony to be included. My name is Kelly Rios and I support bill LCO No. 5009. I am a constituent of Plainville, Connecticut, zip code 06062. I am a first year medical student at the University of Connecticut School of Medicine.

At some point in nearly every class, my classmates and I are reminded that the state of our health is determined by social factors that include where we learn, work, and live. I invite you to picture what those environments look like for you. Do you see grass and trees outside your home? Do you feel safe walking in your neighborhood for some fresh air? Is your doctor's office just a short drive away? This past year, has your office been relocated to steps away from your bedroom? Now imagine that your likelihood of accessing these things—green space, safety, quality air, healthcare, reliable transportation, a job and safe workspace—was pre-determined for you by the color of your skin. This is the America we built. This is the America we *must* rebuild.

It has been established that systemic racism is to blame for the racial inequities that our Black and Brown neighbors face in access to these basic human rights. According to a June 2020 report released by the New Haven-based non-profit organization DataHaven, in Connecticut, the average lifespan of individuals from urban areas, which are notably more diverse, is more than 6 years less than those living in the wealthiest cities. The current pandemic has put a spotlight on such racial disparities, as Black and Latino residents in Connecticut have died from COVID-19 at higher rates than their white counterparts. The next step is a critical need for a dedicated team of qualified individuals to study the inequities laid out by LCO No. 5009 Section 7. In this way, the state of Connecticut will not only begin to seek racial health equity through legislative action based on research conducted in our own neighborhoods, but will become a leader for other states to follow.

Briefly, I would like to make a suggestion for the proposed legislation LCO No. 5009, Section 7. It is known that the members of the Black community may hold reservations regarding the healthcare system, rooted in a history of unethical experimentation on Black people in America. This has been suggested as a possible reason for low COVID-19 vaccination rates of Black people. However, I implore the members of the proposed Truth and Reconciliation Commission to take an in depth look at the equitable distribution of COVID-19 vaccinations across Connecticut. As a result, my hope is that the state can improve upon their strategy for equitable allocation of emergency resources in the future.

Thank you for your time.

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